



The University of  
**Montana**

EXHIBIT 4  
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Report to the Montana State Legislature Joint Subcommittee on Corrections and Public Safety.

The following is a summary of key points from a research report developed for the Montana Department of Corrections entitled "Predicting and Reducing Recidivism: Factors contributing to recidivism in the State of Montana Pre-release Center Population & the Issue of Measurement: A report with recommendations for policy change." The full document was previously submitted to you on behalf of the Department of Corrections by Dr's Timothy Conley and David Schantz of The University of Montana School of Social Work. Both researchers are available to answer questions.

The study is based on a comprehensive scientifically valid sample from the state's five Pre-release Centers (PRCs) including 1178 resident records. Findings reported here represent the entire population of the PRC system. For this study, the information collected was extensive and the report forwarded to the committee members details the findings below including additional information that will be useful for policy decision making within the Department. The following bulleted items are the major findings and recommendations.

- 93.1 % of all residents are found to have a condition of substance abuse or chemical dependency disorder either at admission or discharge.
- Mental Illness exists in 45.8% of the PRC population. Broken down by gender 69.0% of females and 41.0% of males have a mental illness diagnosis.
- 94.3 % of all offenders with a mental illness have a chemical dependency diagnosis. This is commonly referred to as a co-occurring disorder.
- 70% of the population holds high school equivalency in education, 30 % do not. Broken down by gender and ethnicity there are no differences between ethnic groups of men (69.4% have high school equivalency). There *are* differences among women. 86.9 % of white females have high school equivalency, 46.4 % of Native American females have high school equivalency.
- Native Americans are 2.4 times more likely to return to institutional status than non Native Americans. The detailed recidivism prediction model is on page 14 of the previously submitted report.

Recommendations are made to:

- Develop a comprehensive reliable long term data tracking system that allows the measurement of the effects that changes to the PRC system have on recidivism rates.
- Incorporate common assessment and screening tools across all PRCs regarding chemical dependency/abuse and mental illness to better target services to this group.

The material in the following two paragraphs can not be found directly in the previously submitted report but follow from it:

It is important to realize that the resident population of the PRCs (and other DOC facilities) is not a single unified group of persons impacted uniformly by changes made in the DOC system. To be successful in reducing recidivism and lowering costs to the DOC (and other state institutions) as well as Montana society, it is important that the DOC be able to recognize in a measurable way the differences between groups of persons in the system. Development of interventions that have a measurable impact by lowering costs and recidivism will only be possible when service improvements are combined with better measurement. Missteps can be corrected in a timely fashion when adequate measurement accompanies service development.

Understanding of key factors that contribute to Native American return to institutional status is needed. Policy changes that improve mental health and addictions services (or other services) either in the PRC system or through diversion are also needed. It is recommended that program changes and their impact on recidivism and costs be measured. Service and policy shifts made by DOC may potentially affect non DOC Montana institutions. Tracking of outcomes is critical to insure that any measures taken to reduce the costs and recidivism of PRC residents have a positive impact across all Montana institutions.

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